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Introduction and Overview of HIV Prevention Planning & The Central AZ HIV Prevention Advocates

Introduction

Dear Member:

Thank you for your interest in the Central AZ HIV Prevention Advocates.

This manual was designed to help you learn more about HIV prevention, our group, and the community planning process. It includes a brief overview and history of the group, our by-laws, and more.

Please feel free to call us if you have any questions about the content of this manual or if you would like more information about the Central AZ HIV Prevention Advocates. Our office number is 602-506-6009.

Thanks again,

Central AZ HIV Prevention Advocates Co-Chairs and Staff

Contact Information

Central AZ HIV Prevention Advocates Office
Maricopa County Department of Public Health
4041 N Central Ave. Suite 1531
Phoenix, AZ 85012
Phone: 602-506-6009
Fax: 602-506-6896

Group Structure

Background

Each year, the Centers for Disease Control and Prevention (CDC) provide the state of Arizona with funding for local HIV prevention programs.

The Central AZ HIV Prevention Advocates (formerly known as the Central AZ CPG) is a regional HIV Prevention Advisory body to the HIV Prevention Planning Group of Arizona (PPGA), the statewide Community Planning Group (CPG). The Central AZ HIV Prevention Advocates recommends which populations in Maricopa and Pinal County should be targeted for HIV Prevention funding and how these populations should be targeted. Our recommendations then go to the PPGA. The Arizona Department of Health Services runs the PPGA. The PPGA uses our recommendations to guide the creation of the statewide HIV Prevention Plan, including how HIV prevention programs in Maricopa and Pinal counties will be funded.

Membership

All Central AZ HIV Prevention Advocates meetings and activities are open to everyone. Members of the Central AZ HIV Prevention Advocates have included people with HIV/AIDS, high school students, directors of programs for injecting drug users, men and women involved in HIV/AIDS organizations, and other concerned members of the community. The majority of members are personally or professionally involved in HIV prevention.

Any person attending a meeting is welcome to participate in discussions and activities. However, there are a few guidelines that affect voting. First, a member must have completed a membership application. Second, a member must have attended the last two meetings in order to be eligible to vote. Final decisions are made by consensus, so all eligible voting members must agree on the outcome.

Leadership

The three co-chairs lead the Central AZ HIV Prevention Advocates. One co-chair is employed by the Maricopa County Department of Public Health and is the program coordinator, the staff for the group. The Central AZ HIV Prevention Advocates staff coordinates all Central AZ HIV Prevention Advocates activities and helps the Central AZ HIV Prevention Advocates complete its goals. The other two co-chairs are known as community co-chairs and are elected and voted in by the Central AZ HIV Prevention Advocates membership. The role of the staff and co-chairs is to facilitate the meetings and overall process of the Central AZ HIV Prevention Advocates.

Core Objectives

1. Foster the openness and participatory nature of the regional advisory planning group (the Central AZ HIV Prevention Advocates).

2. Ensure that the regional advisory planning group (the Central AZ HIV Prevention Advocates) reflects the diversity of the epidemic in the jurisdiction and that expertise in epidemiology, behavioral/social science, health planning and evaluation are included in the process.

3. Ensure that the priority HIV prevention needs are determined based on an epidemiological profile and community services assessment.

4. Ensure that interventions are prioritized based on explicit consideration of priority needs, outcome effectiveness, cost and cost effectiveness, theory and community norms and values.

5. Foster strong, logical linkages between the prevention planning process, application for funding and allocation of CDC resources.

MISSION:

To develop comprehensive HIV Prevention recommendations for Central Arizona that will result in programs that are responsive to high priority, community validated needs within defined populations.

VISION

The Central AZ HIV Prevention Advocates group will serve as a model for participatory community planning throughout the nation.

The Central AZ HIV Prevention Advocates will:

- Help set priorities for Arizona Department of Health Services funding
 - Support increases in HIV prevention planning funds
 - Support public and private grant applications for funds
- Improve the awareness of HIV and HIV Prevention among the public

VALUES

Respect

We value people. We respect each other individually and as members of the Central AZ HIV Prevention Advocates. We are committed to understanding and valuing the diversity of the contributions individuals make to HIV Prevention Planning. We allow individuals an opportunity to speak without being interrupted.

Commitment

We are committed to developing high quality HIV Prevention recommendations for Central Arizona within the established time lines. We commit to being punctual and to attending all Planning Group meetings. We will participate fully in Central AZ HIV Prevention Advocates meetings and committee meetings in order to see this project to its successful completion.

Trust

We will build trust with open, respectful, and candid communication and will work towards group consensus. We will participate fully in the Central AZ HIV Prevention Advocates and support the open expression of ideas.

Integrity

We will hold ourselves to the highest standards of ethical behavior. We will be honest and straightforward in communications with everyone and will treat others as we wish to be treated.

Work Ethic

We understand that we are responsible for our group's actions and work. The benefits of our hard work will be an HIV Prevention Plan that is responsive to community needs and personal and professional growth for group members.

Parity

We understand that the members of the Central AZ HIV Prevention Advocates are the heart and spirit of the planning process. We will treat each other in a fair manner and allow all view points to be represented. We believe in inclusiveness and participation of individuals at risk for HIV.

Central AZ HIV Prevention Advocates Ground Rules

We ask YOU to...

- Participate — voice your opinions, articulate who you represent and why you are involved with the Central AZ HIV Prevention Advocates, show up at meetings and events. Actively help us work towards our group goals
- Respect the opinions and ideas of others.
- Embrace different styles - step back and bring in different ways of doing things
- Give effective feedback — use “I” statements and be non-confrontational
- Introduce yourself to new members
- Complete the evaluation forms provided at the end of the meeting
- Have fun!

WE will...

- Incorporate other ways of communicating within the group, such as talking circles, town hall meetings, the “parking lot”, etc.
- Begin and end meetings with affirmative/positive statements or activities.
- Operate out of a culture of trust and respect
- Focus on the mission and goals during each meeting.
- Become more active in the community. members sponsor local town hall meetings, talk at schools, etc
- Work with new members in ways that help them fully participate
- Enjoy and have fun!

Adopted 3-8-2005

Meeting Information

Membership in the Central AZ HIV Prevention Advocates

Can I be a member?

Yes. Anyone interested in HIV prevention in Maricopa and Pinal Counties can be a member of the Central AZ HIV Prevention Advocates.

What is the time commitment?

The Central AZ HIV Prevention Advocates meets once each month as a full group. Members are encouraged to attend and actively participate in at least one of the Central AZ HIV Prevention Advocates committees. Committee meetings are scheduled as needed.

Who can participate in meetings?

Any and Everyone!
For more information about participation see PIR on page 14.

Who can vote at meetings?

The Central AZ HIV Prevention Advocates has two rules for voting eligibility. First, a member must have completed a membership application. Second, a member must have attended the last two meetings in order to be eligible to vote. Final decisions are made by consensus, so all eligible voting members must agree on the outcome. This by-law was established to ensure that all members participating in a vote were educated on the issues related to the vote.

Why should I become a member?

First of all, you'll be working with some great people who are smart, fun, and motivated. Second, you'll be having an influence on what is being done for HIV prevention in our community.

Where can I learn more?

Call the Central AZ HIV Prevention Advocates office at 602-506-6009.

Central AZ HIV Prevention Advocates Committee Structure

The Central AZ HIV Prevention Advocates has six main committees:

The Membership committee is accountable for regularly monitoring the representation of the Central AZ HIV Prevention Advocates, seeking out prospective members from populations under-represented within the Central AZ HIV Prevention Advocates, and ensuring that the membership composition reflects the regional epidemic. The committee will review new member applications and present new members to the full group. This body will also partner with ADHS to conduct new member orientation and will be responsible for handling the additional training needs of new and continuing Central AZ HIV Prevention Advocates members to ensure parity among all group members.

The Epidemiology/Priority Setting committee examines the HIV/AIDS demographics of the region and works to integrate information from the epidemiology updates, Integrated Epidemiologic Profile, and Community Services Assessment to develop a list of recommended prioritized target populations and appropriate science-based prevention interventions for the Comprehensive HIV Prevention Plan.

The Community Services Assessment committee gives detailed feedback to ADHS as to the appropriate scope, content, and implementation of the Community Services Assessment and advise the Central AZ HIV Prevention Advocates as to the weighting of CSA information during the Priority Setting process. Components of the Community Services Assessment include descriptions of the information to be collected, the needs of populations at risk for and/or living with HIV infection, the prevention activities/interventions currently and previously implemented in populations at risk, the most recent program evaluation/QA data, and other sources of information highlighting HIV prevention needs and service gaps.

The Process develops and interprets the Central AZ HIV Prevention Advocates by-laws, develops a process for decision making and ensures a fair process.

The Research and Funding Committee searches for new research data, HIV prevention funding resources and new community-based partnerships to inform the Central AZ Prevention Advocates, the Epidemiology/Priority Setting committee, and the Community Services Assessment committee. Data gathered by the committee is designed to enhance the discussion of recommendations around targeted populations needing funding and implementation of new evidence-based prevention models in the Central AZ region.

The Marketing and Advocacy Committee works to develop outreach and social marketing materials for the Central AZ HIV Prevention Advocates. The committee works to support HIV Prevention social marketing efforts in Maricopa and Pinal counties. The committee also develops and supports projects to enhance HIV Prevention advocacy in the Central region (ex: speakers' bureau, town hall events, etc).

The Central AZ HIV Prevention Advocates may also convene special work groups or additional committees.

How the Full Group Meetings Work

All members receive a meeting reminder in the mail and/or email several days before a meeting. Occasionally, a reminder does not arrive in time, so be sure to call the Central AZ HIV Prevention Advocates office (602-506-6009) if you are unsure of a meeting date or location.

An agenda is sent out ahead of time listing the items that will be covered in the meeting.

At the beginning of each meeting, a Time Monitor and Process Monitor are announced. Members wishing to act as the Time or Process Monitor can contact Central AZ HIV Prevention Advocates staff prior to the meeting. If no members have volunteered before the meeting, monitors will be chosen from attending members at the meeting. The Time Monitor keeps track of the amount of time spent on any issue and tells the group when an activity has gone beyond the allotted time. The Process Monitor ensures that activities are on target. When a new issue arises that is not on target, it is listed on the “Parking Lot” flip chart and discussed at a later time.

A light meal is served at the full group meetings.

All people who attend meetings are welcome to comment and participate fully in meetings. Final decisions are made by eligible voting members ONLY. To be eligible to vote, you must have completed a membership application AND you must have attended the most recent two full group meetings (see “Central AZ HIV Prevention Advocates Membership”).

Final decisions are made by CONSENSUS. This means that all members agree to support the decision.

PIR in the HIV Prevention Planning Process

What is PIR?

A fundamental component of the HIV prevention community planning process is parity, inclusion, and representation (often referred to as PIR). All three concepts are intended to ensure that HIV Prevention Planning Groups include a diverse group of members who truly understand and represent those most affected by the epidemic. PIR is also intended to ensure that every member is able to participate and have a voice in what happens.

Parity: How Information is Shared

Parity means that all members can participate and carry out planning tasks. To achieve parity, all members must get an orientation to community planning, have opportunities to learn and build community planning skills, and have a voice in making decisions.

The Central AZ HIV Prevention Advocates will ensure parity through:

- The timely distribution of agendas before meetings
- Providing regular orientations to all persons involved in the Planning Process
- Ensuring that decisions are made at regularly scheduled meetings
- Consistently providing an opportunity for all voting members to participate in discussions before decisions are reached
- Leadership that involves, includes and encourages diversity
- Providing culturally congruent and consistent materials

Inclusion: Community Content

Inclusion is defined as meaningful involvement of members in the process with an active voice in decision-making. An inclusive process assures that the views, perspectives, and needs of all affected communities are included.

The Central AZ HIV Prevention Advocates will ensure inclusion through:

- Recruiting and maintaining a voting membership that accurately represents the communities most impacted by HIV/AIDS
- Recruiting a diverse membership that draws from all realms of the community (CBOs, ASOs, business coalitions, private/public institutions, etc.)

Representation: Community Participation

Representation is the act of serving as an official member reflecting the perspective of a specific community. A representative should truly reflect the perspective of that community's values, beliefs, and behaviors. It is also important, however, that representatives are able to participate objectively in the overall prioritization process.

The Central AZ HIV Prevention Advocates will ensure representation through:

- Inclusion of non-CDC funded agencies in the HIV Prevention Process
- Certainty that all representatives have community linkages
- Providing an opportunity for at-large community participation in the group's process
- Opening the Central AZ HIV Prevention Advocates Process to membership outside of the current HIV/AIDS industry
- Creating & maintaining structures that provide for internal and external accountability

Consensus Voting Procedure

You may notice that “voting” at Central AZ HIV Prevention Advocates meetings seems to involve holding fingers in the air. You are correct. The Central AZ HIV Prevention Advocates uses this method to show not only agreement, but the degree to which each person agrees with the decision. The chart below should be helpful when you become eligible to vote.

5 Fingers	4 Fingers	3 Fingers	2 Fingers	1 Finger	Closed Fist
I believe this proposal is a good idea and I enthusiastically endorse it.	I feel this idea has merit and I support it.	I am weighing the advantages and disadvantages of this idea and believe it is worthy.	I am not convinced that this idea is feasible, but I am willing to take a wait-and-see position.	I am opposed to the idea, but it has enough merit that I would not exercise a veto to prevent implementation of the proposal.	I show no support and will block the proposal.

Roles and Responsibilities of the Community Co-Chairs

Expected roles

- Take responsibility for guiding the planning group to accomplish goals within the stated Central AZ HIV Prevention Advocates mission
- Give input to Central AZ HIV Prevention Advocates agenda
- Serve as facilitator for Central AZ HIV Prevention Advocates meetings and share responsibilities with other co-chairs
- Promote community participation from diverse groups
- Ensure that the Central AZ HIV Prevention Advocates functions under its set roles and responsibilities
- Provide guidance and support to the Central AZ HIV Prevention Advocates members
- Participate in briefings before and after each Central AZ HIV Prevention Advocates meeting
- Ensure that Central AZ HIV Prevention Advocates members are promptly oriented regarding their role in the planning group
- Attend periodic conference calls
- Attend any necessary statewide meetings
- Become a liaison for 1 to 2 committees

Terms of commitment As a co-chair you will serve under the following terms:

The term of service is noted in the by-laws. Each community co-chair of the full Central AZ HIV Prevention Advocates shall serve for two consecutive years and is eligible to serve an additional 2 year term. To be eligible to be a community co-chair, an individual must have attended at least 2/3 of the meetings in the past calendar year. The planning group shall have the right to remove a community co-chair for good cause. A two-thirds majority vote is required for removal. A vote to remove any member or co-chair must be preceded by the full grievance procedure as outlined in Article IV, and all Central AZ HIV Prevention Advocates members must be notified at least one week prior that a removal vote will be taken.

Major responsibilities As a co-chair you will be expected to:

- Determine how to jointly share co-chair responsibilities
- Manage conflicts that may arise among members of the Central AZ HIV Prevention Advocates
- Participate in the HIV Prevention Planning Group of AZ (PPGA)

The HIV Prevention Planning Group of Arizona (PPGA)

What is the PPGA?

The HIV Prevention Planning Group of Arizona (PPGA) is the centralized planning authority for HIV prevention in Arizona. Organized and created by the Arizona Department of Health Services (ADHS), the PPGA develops a cohesive statewide HIV Prevention Plan for Arizona utilizing recommendations from the three regional advisory bodies (former Regional Community Planning Groups). The PPGA reviews epidemiological data as well as regional community needs assessments in order to create the Arizona HIV Prevention plan that includes the statewide populations to be targeted with specific interventions.

How is the Central Region represented?

The Central AZ HIV Prevention Advocates has 4 representatives on the PPGA. The state appointed co-chair is mandated to be one of the regional representatives. The community co-chairs are members along with one Central AZ HIV Prevention Advocates member at large, who is chosen by the Central AZ HIV Prevention Advocates membership.

Who are the other members of the PPGA?

The other two regional advisory groups (Northern and Southern) each have 4 representatives. Additionally there is a representative from each of the following groups: Arizona Department of Health Services Office of HIV/AIDS; Arizona Department of Health Services STD program; Arizona Department of Health Services Hepatitis C Program; Arizona Department of Education; Ryan White Title II Care Consortia and Title I Planning Council (total of five representatives); Arizona Department of Corrections; Intertribal Council of Arizona. There are also representatives of populations impacted by the epidemic, including persons living with HIV/AIDS.

For more information on the PPGA, contact the Central AZ HIV Prevention Advocates office at (602) 506-6009.

The HIV Community Planning Coordinator at ADHS is at (602) 364-3883.

Job Description for HIV Prevention Planning Group of Arizona (PPGA) Central Region Representative Member

To be eligible to be a regional representative of the PPGA, a person must have:

- Actively served as a Central AZ HIV Prevention Advocates member for at least 1 year
- Actively participated on at least 1 Central AZ HIV Prevention Advocates committee

As a regional representative of the PPGA, a member is expected to:

- Serve a 1-3 year term (length of term to be determined)
- Attend full group PPGA meetings 3-4 times annually, as requested by ADHS
- Attend meetings during traditional work hours, in the evenings, and on weekends if necessary
- Attend regional and national conferences as opportunities arise
- Travel to meetings as necessary (travel reimbursement provided)
- Serve on PPGA committees as requested
- Represent the needs and views of the Central region, noting that these may differ from personal interests
- Report the activities of the PPGA to the Central region membership
- Meet as a regional team to plan for PPGA meetings as necessary

Policy and Procedures

Excused Absences Policy

- If a member is unable to attend a meeting and wishes to retain his or her attendance record, the member may speak with Central AZ HIV Prevention Advocates staff to request an excused absence
- Two excused absences in a twelve-month period are permissible without jeopardizing consensus status
- In the case of a chronic illness that may result in more than two absences, a member may meet with the Central AZ HIV Prevention Advocates co-chairs to discuss the situation
- A member who is unable to attend a meeting may submit written comments, opinions on agenda items, or announcements to be shared with the group. This should be done no later than one day prior to the meeting, and should be provided to Central AZ HIV Prevention Advocates staff

Child Care Reimbursement Policy

- Members must complete an initial application to establish general information, such as name(s) of dependent(s), age(s) and amount being charged for childcare
- The age requirement for reimbursement is 16 years or younger, with the exception of special needs children above the age of 16
- Reimbursements will be limited to dependents. Dependents are defined as those children residing in your home at least 6 months of the year
- Reimbursements are on a meeting by meeting basis, implying responsibility to inform Central AZ HIV Prevention Advocates staff if a reimbursement is necessary
- Members must arrive on time and are expected to attend at least the majority of the meeting to receive reimbursement
- It is the member's responsibility to see the Central AZ HIV Prevention Advocates coordinator during the break or at the end of the meeting to sign reimbursement documents
- If there are any changes to the member's childcare situation that affect the application, it is the member's responsibility to inform the Central AZ HIV Prevention Advocates coordinator and update his/her application
- Cash will not be available for distribution during full group meetings. Reimbursements will be issued in check form and will be available 2-3 weeks after the full group meeting

If you have any questions or concerns please contact staff @ 602-506-6009.

Mileage Reimbursement Policy

- Members must complete an initial application to establish general information, such as residency and mode of transportation
- Reimbursements are based on round-trip mileage from your home to the Central AZ HIV Prevention Advocates meeting location
- If public transportation is being utilized you must supply the Central AZ HIV Prevention Advocates coordinator with a receipt
- Members must inform the Central AZ HIV Prevention Advocates coordinator 7 days in advance of the full group meeting to receive reimbursement
- Reimbursements are on a meeting-by-meeting basis
- Members are responsible for informing the Central AZ HIV Prevention Advocates coordinator when reimbursement is necessary
- Members must arrive on time and are expected to attend the majority of the meeting to receive reimbursement
- Cash reimbursement will not be available for distribution during full group meetings. Reimbursements will be issued in check form and will be available within 2-3 weeks after the full group meeting

If you have any questions or concerns please contact staff @ 602-506-6009.

Conference/Training Attendance Policy

- Members that sign up to attend trainings and do not show up will be put on a 1 year probation excluding them from being eligible to attend any summits, trainings, or conferences
- Members who have attended out of state conferences in the past can now be eligible to reapply after 3 years
- Members must fill out an application and get it in by the deadline (Members names will not be entered without an application)
- Members must be available to travel the day before and the day after if travel arrangements require it
- Members must attend the conference when they are there
- Members must give a short presentation to the full group when they return
- Members must complete and submit the Central AZ HIV Prevention Advocates training form
- Upon receipt of a member's application, his/her name is entered for each meeting he/she attended in the previous year
- Names of all applicants will be placed in a drawing
- With many names now in the drawing, names will be selected randomly. The first name drawn will be the first person contacted to attend. The second will be the second, and so on

By-Law Change Policy

adopted July 10, 2001

- The proposed change must be presented to the Process Committee.
- The Process Committee will
 - Put the proposed change in appropriate and clear wording
 - Develop a recommendation with rationale to the full group, which may include, but is not limited to: approve the change, do not approve the change, no position or split position.
- The proposed change will be placed on the agenda of the next scheduled full group meeting and text of the proposed change will be sent to Central AZ HIV Prevention Advocates members with the agenda.
- At the scheduled full group meeting, discussion on the proposed change will be allowed (per discretion of the co-chairs) as follows: no more than 5 minutes from the member proposing the change, no more than 5 minutes from the Process Committee, and no more than 10 minutes of pro or con discussion from the full group.
- Immediately following the discussion, a vote will be taken on the proposed change. The proposed change is ratified only if it receives a 2/3 majority by eligible voting members present. If the change does not pass by a 2/3 majority, no further discussion will be allowed.
- Notes: a) The voters will be voting on whether or not to *adopt a change*, not on whether or not to keep the by-laws the same. b) The 2/3 majority vote will be used *only* for votes about by-laws changes. The regular voting system (consensus, etc.) will be used for all other votes.
 - The same change may not be proposed more than once every six months. The Process Committee will determine whether or not a proposed change is the same or different from previous proposals.

Appendices

Appendix A: List of Acronyms

List of Acronyms

AAMUAA	African American Men United Against AIDS
ADAP	AIDS Drug Assistance Program
ADHS	Arizona Department of Health Services
AIDS	Acquired Immune Deficiency Syndrome
Arizona OIC	Arizona Occupational Industrialization Center
ASO	AIDS Service Organization
BST	Brothers and Sisters of TRIBE (Together Responsible Informed Black Empowered)
CAPS	Center for AIDS Prevention Studies
CARE Act	Ryan White Comprehensive AIDS Resource Emergency Act
CBC	Congressional Black Caucus
CBO	Community Based Organization
CDC	Centers for Disease Control and Prevention
CLI	Community Level Intervention
CPG	Community Planning Group
DOD	Department of Defense
EPI	Epidemiology
FDA	Food and Drug Administration
GLBT	Gay, Lesbian, Bisexual, Transgender
GLI	Group Level Intervention
HAART	Highly Active Antiretroviral Therapy
HCV	Hepatitis C
HE/RR	Health Education/Risk Reduction
HHS	Health and Human Services
HIV	Human Immunodeficiency Virus
HRH	High Risk Heterosexual
HRSA	Health Resources Services Administration
IDU	Injecting Drug User
ILI	Individual Level Intervention
MMWR	Morbidity Mortality Weekly Report
MSM	Men who have Sex with Men
NAPWA	National Association of People With AIDS
NASTAD	National Alliance of State and Territorial AIDS Directors
NIH	National Institutes of Health
NMAC	National Minority AIDS Council
NPIN	National Prevention Information Network
OMH	Office of Minority Health

PCM	Prevention Case Management
PCRS	Partner Counseling and Referral Service
PIR	Parity, Inclusion and Representation
PLWH	People Living With HIV
PPGA	HIV Prevention Planning Group of Arizona
RFP	Request for Proposal
SALT	Saving African American Lives Today
SAMHSA	Substance Abuse and Mental Health Services Administration
STD	Sexually Transmitted Diseases
TA	Technical Assistance
TB	Tuberculosis
TRIBE	Together Responsible Informed Black Empowered
UNAIDS	The Joint United Nations Programme on HIV/AIDS
WSW	Women who have sex with women
YMSM	Young Men who have sex with men

Appendix B: By-laws

By-Laws Central Arizona HIV Prevention Advocates

Origin

In the spring of 1994 under the direction of the Centers for Disease Control and Prevention (CDC) and the Arizona Department of Health Services (ADHS), the Central Arizona Region Community Planning Group (CPG) began.

In June 2005, the Central Arizona Region Community Planning Group (CPG) became an advisory body to the state community planning body, the Prevention Planning Group of Arizona (PPGA). In January 2006, the group changed responsibilities and became the Gecko Forum. In September 2006, the group revised its name to Central Arizona HIV Prevention Advocates.

Mission

The mission of the Central AZ HIV Prevention Advocates is to develop a regional HIV Prevention Plan for Central Arizona that will result in programs that are responsive to high priority, community-validated needs within defined populations.

Article I. Membership and Leadership

Section 1. Size

There is no minimum or maximum size of the Central AZ HIV Prevention Advocates. However, the Central AZ HIV Prevention Advocates should strive to have 35 to 45 consensus decision making members.

Section 2. Membership selection.

The process for becoming a consensus decision making member is as follows:

1. Individual completes membership form and acknowledges the conflict of interest statement in the by-laws.
2. Any member who has attended two consecutive full group meetings will be eligible to participate in the consensus process at their third meeting.

The Central AZ HIV Prevention Advocates strives to maintain an active consensus membership that is at least one-half community members (those not directly affiliated with any HIV/AIDS services or organizations) with the remaining half representing local AIDS Service Organizations. As an advisory group to the PPGA, the Central AZ HIV Prevention Advocates welcomes the participation of individuals living with HIV/AIDS, as well as individuals representing the ethnic and cultural diversity of Maricopa and Pinal counties. The Central AZ HIV Prevention Advocates tries to reflect the realities of HIV in Maricopa and Pinal counties.

Section 3. Attendance

Attendance at full group meetings will be recorded from a member's signature on the sign-in sheet used in the latter part of the meeting. If a member is unable to attend a meeting and wishes to retain his or her attendance record, the member may speak with Central AZ HIV Prevention Advocates staff to request an excused absence. Two excused absences in a calendar year are permissible without jeopardizing consensus status. In the case of special circumstances that may result in more than two absences, a member may meet with the Central AZ HIV Prevention Advocates co-chairs to discuss the situation.

A member who is unable to attend a meeting may submit written comments, opinions on agenda

items, or announcements to be shared with the group. This should be done no later than one day prior to the meeting, and should be provided to Central AZ HIV Prevention Advocates staff.

Section 4. Participation

The Central AZ HIV Prevention Advocates has four standing committees.

The Process Committee develops and interprets the Central AZ HIV Prevention Advocates by-laws, recommends group policies and procedures, develops a process for decision making and ensures a fair process.

The Membership Committee is accountable for regularly monitoring the representation of the Central AZ HIV Prevention Advocates, seeking out prospective members from populations under-represented within the Central AZ HIV Prevention Advocates, and ensuring that the membership composition reflects the regional epidemic. The committee will review new member applications and present new members to the full group. This body will also partner with ADHS to conduct new member orientation and will be responsible for handling the additional training needs of new and continuing Central AZ HIV Prevention Advocates members to ensure parity among all group members.

The Epidemiology and Priority Setting Committee examines the HIV/AIDS demographics of the region and works to integrate information from the epidemiology updates, Integrated Epidemiologic Profile, and Community Services Assessment to develop a list of recommended prioritized target populations and appropriate science-based prevention interventions for the Comprehensive HIV Prevention Plan.

The Community Services Assessment and Evaluation Committee gives detailed feedback to ADHS as to the appropriate scope, content, and implementation of the Community Services Assessment and advise the Central AZ HIV Prevention Advocates as to the weighting of CSA information during the Priority Setting process. Components of the Community Services Assessment include descriptions of the information to be collected, the needs of populations at risk for and/or living with HIV infection, the prevention activities/interventions currently and previously implemented in populations at risk, the most recent program evaluation/QA data, and other sources of information highlighting HIV prevention needs and service gaps. The committee also works with ADHS and the PPGA in evaluating the effectiveness of targeted HIV Prevention programs.

Additional work groups and committees may be convened during the planning cycle depending on the group's need.

Because the majority of planning activities occur during committee meetings, it is strongly suggested that all members participate in at least one committee during the planning cycle.

Section 5. Chairs

The co-chairs share responsibility for guiding the group in accomplishing its mission and goals. The Arizona Department of Health Services (ADHS) will select a designated representative as one co-chair that will also serve as the group's program coordinator (staff) and the consensus members will select the other two co-chairs (community co-chairs). To be eligible to be a community co-chair, an individual must have attended at least 2/3 of the meetings in the past calendar year. Co-chairs are eligible to participate in the consensus process. Committee chairs do not need to meet these requirements; they may have any level of experience on the Central AZ HIV Prevention Advocates.

Section 6. Term limits

Each community co-chair of the full Central AZ HIV Prevention Advocates shall serve for two consecutive years and is eligible to serve an additional 2 year term. The program coordinator's term is not limited.

Section 7. Removal

An individual member of the Central AZ HIV Prevention Advocates is eligible to be a member for an unlimited number of years. Members may voluntarily resign at any time by notifying Central AZ HIV Prevention Advocates staff or co-chairs. After three consecutive unexcused absences, an attempt will be made at contacting the member. If there is no response, the member will be removed from the membership roster and will be required to reapply for membership. The group shall have the right to remove members for good cause such as intentional violation of the conflict-of-interest declaration or repeated disruption of group or committee meetings. A two-third majority is required for removal. The Central AZ HIV Prevention Advocates shall have the right to remove a community co-chair for good cause. A two-thirds majority vote is required for removal. The Central AZ HIV Prevention Advocates cannot automatically remove a program coordinator, but it may recommend removal to the state health department. A two-thirds majority vote is required for such a recommendation. A vote to remove any member or co-chair must be preceded by the full dispute resolution process as outlined in Article IV and all Central AZ HIV Prevention Advocates members must be notified at least one week prior that a removal vote will be taken.

Article II. Decision Making Process

Section 1. Parity

According to the CDC Guidance, parity is defined as “the ability of members to equally participate and carry-out planning tasks/duties. To achieve parity, representatives should be provided with opportunities for orientation and skills building to participate in the planning process and to have equal voice in voting and other decision-making activities.”

Section 2. Objective decision-making

All members, including those that represent organizations, are asked to remember that Central AZ HIV Prevention Advocates consensus and voting decisions should come from an objective viewpoint that weighs the overall priority prevention needs of the regional jurisdictions.

Section 3. Decision-making

Decisions will be made by consensus if at all possible. Consensus, as understood in the Central AZ HIV Prevention Advocates, is achieved when all members present state that they are comfortable with, agree with, or are prepared to step aside from a differing view to allow the group to move forward on a decision. All members present must be prepared to be accountable for the decision, with the noted exception of any who had removed themselves due to conflict of interest. If there is no consensus, decisions will be made by majority vote. A majority vote should be substituted for consensus only as follows:

Once a motion and a second are on the floor, there will be 10 minutes of discussion, which include question and answer, followed by a call for consensus. If agreement is not reached, the group will break into small groups for 15 minutes of discussion followed by 5 minutes of full group process discussion, followed by a call for consensus. If agreement is still not reached the small group process will be repeated, followed by a call for consensus. If agreement is not reached, a majority vote will be taken.

Article III. Governance of Meetings

Section 1. Agenda

Agenda items may be added by calling the Central AZ HIV Prevention Advocates office at least 10 days prior to the meeting date.

Section 2. Open to public

The public may attend any and all Central AZ HIV Prevention Advocates meetings.

Section 3. Reimbursements for meeting attendance.

Pending available funding, the Central AZ HIV Prevention Advocates may reimburse members in need of assistance for expenses incurred as a result of attending full group or committee meetings. Expenses may include, but are not limited to, transportation, childcare, and language interpretation services. A member wishing to request reimbursement should call Central AZ HIV Prevention Advocates staff one week prior to the meeting date. Any use of reimbursement will be kept confidential.

Section 4. Conflict of Interest

A conflict of interest occurs when a Central AZ HIV Prevention Advocates member knows that a given action or decision is likely to have a direct personal, financial or organizational impact on that member, a close relative (spouse, child, parent, or sibling), or domestic partner.

Members of the Central AZ HIV Prevention Advocates are asked to be mindful of potential conflicts of interest and their impact on consensus and decision processes. A Central AZ HIV Prevention Advocates member shall refrain from indicating consensus or voting on matters in which he or she has a conflict of interest as defined in this document.

If a decision is to be made which may directly affect a member's personal, financial or organizational interests, then a potential conflict or the appearance of a potential conflict exists or may be perceived to exist. In such cases:

1. The individual member must clearly declare, as early as possible in the discussion, that a conflict may exist or may be perceived.
2. Other group members may raise the question of whether a specific person has or may have a conflict of interest. If the question of potential conflict of interest is not easily resolved, the situation will be referred to and reviewed by the Process Committee for a decision.
3. Members may voluntarily recuse themselves from participating in a call for consensus.

Article IV. Dispute resolution

The Central AZ HIV Prevention Advocates will have both informal and formal methods of dispute resolution. An informal dispute may be raised by any member at the Central AZ HIV Prevention Advocates meeting filed with the Central AZ HIV Prevention Advocates Program Coordinator. Informal disputes will attempt to be resolved at the next scheduled Central AZ HIV Prevention Advocates meeting through discussion and the consensus process. If attempts at informal dispute resolution fail, formal dispute resolution shall be sought through written notification to the PPGA and/or Chief of the Office of HIV Services at ADHS.

Article V. Amendments

These by-laws may be amended as follows: The proposed change must first be presented to the Process Committee at its scheduled meeting. The proposed change(s) must be mailed to all members at least one week prior to the meeting and the amendment change must be listed on the agenda. Then, the proposed change(s) must be presented to the full Central AZ HIV Prevention Advocates at its scheduled meeting. Those supporting and opposing the amendment will be given equal time to present arguments, then a call for consensus will be taken. The full group should strive to reach consensus, but a two-thirds majority is required for a change to be approved.

Article VI. Dissolution

The Central AZ HIV Prevention Advocates has been formed to assist the Arizona Department of Health Services in the HIV Prevention Community Planning process. Unless the Central AZ HIV Prevention Advocates elects otherwise and creates new by-laws, the Central AZ HIV Prevention Advocates will remain formed for as long as the State of Arizona receives funding for HIV prevention planning.

Appendix C: History

What Is HIV Prevention Community Planning and How Has It Changed?

What is HIV Prevention Community Planning?

HIV Prevention Community Planning is a process in which people from different walks of life and different interests, responsibilities, and involvement in HIV prevention come together as a group to plan how to prevent HIV infection where they live.

In most places, this planning group is called a Community Planning Group (CPG).

CPGs are a partnership between states, local or territorial health departments and community members who are infected with and affected by HIV. One of the roles of the health department is to fund HIV prevention programs in their state, city or territory.

Community members can be community advocates, agency directors, educators, outreach workers, relatives of people living with HIV — usually a very diverse group.

Most important, CPG members should always include people living with HIV and those at high risk of infection. A diverse membership that represents the jurisdiction's prevention populations is important because it helps CPGs design local prevention plans that focus on the real-life, specific needs of people at risk of, or living with, HIV.

CPGs use a variety of methods to achieve such a membership. New members may be recruited through service agencies or through a Ryan White Planning Council. Other recruitment methods may include word-of-mouth; seeking volunteers at health fairs and community forums; and radio, TV, and newspaper ads.

Why Was HIV Prevention Community Planning Necessary?

In the days before HIV Prevention Community Planning, communities were doing HIV prevention activities but they were not often involved in planning comprehensive state and local prevention activities. Decisions about HIV prevention were usually made at the national level — either required by Congress or directed by the U.S. Centers for Disease Control and Prevention (CDC) through funding agreements with state, local, or territorial health departments. CDC is the chief government agency responsible for HIV prevention activities in the United States. HIV Prevention Community Planning was instituted based on the belief that local decision making is the best way to respond to local HIV prevention needs and priorities.

What Do Community Planning Groups Do?

The primary task of the CPG is to work with territorial, state, or local health departments to develop a Comprehensive HIV Prevention Plan that is based on scientific evidence and community needs. Through its descriptions of priority populations and ongoing services and recommendations about prevention interventions, the Plan is intended to guide a jurisdiction's response to the HIV epidemic. The Comprehensive HIV Prevention

Plan should describe the jurisdiction's entire HIV prevention program. This is what "comprehensive" means: all prevention activities and interventions, regardless of funding source. This means that CPGs should recommend activities and interventions that will be funded by federal funds as well as those funded by other sources, including the state or locality, or non-governmental funders such as foundations. As a result, CPGs should know and understand the full range of prevention resources available in the jurisdiction and how these resources are allocated.

To develop a Comprehensive Prevention Plan, the CPG must complete a process that includes:

- Assessing the impact of the epidemic in their localities (the Epidemiologic Profile);
- Describing the prevention needs of populations living with or at risk of HIV infection, the prevention activities and interventions being carried out to address these needs and gaps in existing services (the Community Services Assessment);
- Prioritizing a set of target populations (identified through the Epidemiologic Profile and Community Services Assessment) who require prevention efforts because of their high rates of HIV infection and strong evidence of risky behaviors; and
- Defining a set of prevention activities and interventions (based on intervention effectiveness and cultural/ethnic appropriateness) that are necessary to reduce HIV transmission in target populations;

The health department uses this Comprehensive HIV Prevention Plan as the basis for its annual application to CDC for federal HIV prevention funding. In addition, many states use the Plan to allocate state resources and as a tool to guide other funders.

What Are the Guiding Principles, Goals, and Objectives of Community Planning?

It is important that the community planning process is carried out in a way that ensures participation reflecting the jurisdiction's epidemic. It also needs to do its work effectively. To make sure this happens, CDC expects all CPGs to abide by a specific set of guiding principles (see the Guidance, Section IID, for full explanations of each principle) and to address a specific set of planning goals, objectives, and attributes.

How Has Community Planning Changed Over Time?

With the development of the 2004-2008 Guidance, the community planning process has undergone several changes. The following paragraphs provide a summary.

A new focus on the overall planning process and key products, not planning "steps" Community planning previously emphasized nine steps in the planning process. This suggested that the planning process was linear — one step following another. However, actual experience showed that many parts of the planning process occurred at the same time. Community planning now emphasizes the overall process and the products that result from that process.

The new Community Services Assessment Under the previous *Guidance*, CPGs were responsible for developing three products: a local needs assessment, a resource inventory, and an analysis of gaps in services. Under the current *Guidance*, these activities have been combined and are now referred to as a Community Services

Assessment (CSA). Responsibility for conducting the CSA is now primarily the role of the health department with input and review from CPGs. However, it is important to ensure that the CPG is still actively involved in the assessment process.

Changes to priority setting Under the previous *Guidance*, the Comprehensive HIV Prevention Plan had to rank priority target populations as well as priority HIV prevention activities and interventions. Under the current *Guidance*, the Plan must still identify and prioritize specific populations, but CPGs are no longer required to prioritize interventions. CPGs are now required to identify a set of interventions for each population.

A greater emphasis on monitoring and evaluation Under the current *Guidance*, monitoring and evaluating the planning process are much more structured and well-defined activities than before. CPGs and health departments are expected to use concrete indicators and tools to monitor the process and report on its effectiveness.

Community Planning and CDC's Advancing HIV Prevention Initiative

In recent years, several aspects of the HIV/AIDS epidemic have come together to create the impetus for CDC's Advancing HIV Prevention (AHP) Initiative. The first is that declines in HIV/AIDS illness and death rates have ended, and data suggest that the annual number of new HIV infections may possibly be increasing. Another aspect is the fact that up to one-quarter of the 850,000 to 950,000 people infected with HIV do not know that they are infected. The third aspect is the recent approval of a new rapid HIV test.

AHP addresses these developments by reducing barriers to early diagnosis of HIV infection and helping people get into quality medical care, treatment, and prevention services. CPG members need to be familiar with the AHP initiative because it will have a direct impact on community planning.

Through AHP, CDC is refocusing some HIV prevention activities so as to put more emphasis on:

- HIV counseling, testing, and referral;
- Notification of partners of people infected with HIV;
- Prevention services for people living with HIV; and
- Routine, universal HIV screening as a part of prenatal care.

CDC has four strategies for achieving AHP objectives:

Strategy 1: Make HIV testing a routine part of medical care.

Strategy 2: Develop and encourage models for diagnosing HIV infections outside medical settings, including use of rapid testing.

Strategy 3: Prevent new infections by working with persons diagnosed with HIV and their partners.

Strategy 4: Further decrease prenatal HIV transmission.

How Will AHP Affect Community Planning?

CPG members need to be familiar with AHP and aware of how it affects the community planning process. **As a result of the initiative, all CPGs must now select people living with HIV as the highest priority target population.** All Comprehensive HIV Prevention Plans must identify a mix of activities and interventions for these individuals

because they can transmit HIV to others. As a result, focusing on improving early diagnosis and access to prevention and services for infected individuals may potentially have a large impact on reducing new infections.

These requirements do not mean that all HIV prevention resources must be used to serve people living with HIV — only that their needs must be addressed as the top priority. Your CPG will still conduct a priority setting process for other populations at high risk and your comprehensive plan will still identify a mix of interventions for those populations. However, your plan must select people living with HIV as the number one priority.

Adapted from *HIV Prevention Community Planning: An Orientation Guide* by AED (Academy for Educational Development), May 2004.

Appendix D: Forms

CENTRAL ARIZONA HIV PREVENTION ADVOCATES

MEMBERSHIP APPLICATION

Print or type responses.

Return this form to:

Mary Leasor

Maricopa County Department of Public Health

4041 N Central Ave Suite 1531

Phoenix, AZ 85012

Fax: (602) 506-6896

(Please call Mary at 602-506-6009 if you have questions.)

Yes! I want to apply to serve as a member of the Central AZ HIV Prevention Advocates

Name (as you wish to be listed): _____

Membership is made up of representatives of the populations most at risk for HIV infection in the Central Region (Maricopa & Pinal counties). To represent a designated risk group, a member should be able to reflect that community's values, norms, and behaviors, and have expertise in understanding and addressing the HIV prevention needs of the population. Representatives also must be able to participate in the Central AZ HIV Prevention Advocates and objectively weigh the overall priority prevention needs of the region and state.

Below is a list of currently identified risk groups. Please indicate if you represent any of the following. All possible target populations may not appear at this time.

Please choose <u>one</u> area of representation:	Please choose any additional attributes of your representation:
<ul style="list-style-type: none"><input type="radio"/> HIV+ persons<input type="radio"/> MSM (men who have sex with men)<input type="radio"/> IDU (injection drug users)<input type="radio"/> Heterosexuals<input type="radio"/> MSM/IDU (men who have sex with other men and use injection drugs)	<ul style="list-style-type: none"><input type="radio"/> Male<input type="radio"/> Female<input type="radio"/> Transgendered<input type="radio"/> Urban<input type="radio"/> Rural<input type="radio"/> Black / African American<input type="radio"/> Hispanic / Latino<input type="radio"/> Asian / Pacific Islander<input type="radio"/> American Indian / Alaska Native<input type="radio"/> Caucasian/European<input type="radio"/> Youth<input type="radio"/> Incarcerated persons

(SIDE 1 of 2)

What contributions, skills, knowledge, etc. do you have that will benefit the Group?
(Please attach a separate piece of paper if there is not enough space to respond)

Address (where you wish information to be sent):

Telephones: (W) _____ (H) _____

FAX _____ e-mail _____

Would you like the Central AZ HIV Prevention Advocates information to be sent to your ☐ postal mailing address or ☐ e-mail address?

List email: _____

I understand the expectations of membership in the Central AZ HIV Prevention Advocates. I have read / discussed and agree to abide by the guidelines and by-laws of the Central AZ HIV Prevention Advocates.

Signature _____

Thanks for your interest!

(SIDE 2 of 2)



Central AZ HIV Prevention Advocates



CHILD CARE REIMBURSEMENT APPLICATION

Name: _____ Date: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone -day: _____ Phone - evenings: _____
E-mail: _____

Name of Child	Age & date of birth for child	Amount charged for childcare

The following stipulations apply:

- The age requirement for reimbursement is 16 years or younger, with the exception of special needs children above the age of 16
- Reimbursements will be limited to dependents. Dependents are defined as those children residing in your home at least 6 months of the year
- Reimbursements are on a meeting by meeting basis
- Members are responsible for informing staff when reimbursement is necessary
- Members must arrive on time and are expected to attend at least the majority of the meeting to receive reimbursement
- You must inform the Central AZ HIV Prevention Advocates Coordinator **7 days in advance of the full group meeting** in order to receive reimbursement

Special Note: According to the by-laws the reimbursement process is a confidential one. It is the member's responsibility to see the Central AZ HIV Prevention Advocates Coordinator during the break or at the end of the meeting to sign reimbursement documents.

By signing this document I agree that the above statements are true and correct. I understand that if there are any changes to my child care situation that affect this application it is my responsibility to inform the Central AZ HIV Prevention Advocates Coordinator and update my application.

Signature

Date

Maricopa County Department of Public Health
Central AZ HIV Prevention Advocates
4041 N Central Ave. Suite 1531 Phoenix, Arizona 85012
Phone: (602) 506-6009 Fax: (602) 506-6896



Central AZ HIV Prevention Advocates



Meeting Childcare Reimbursement Form

Name: _____

Phone: _____

Amount of Reimbursement: _____

Purpose: For babysitting expenses in order to attend the Full Group Meeting
on _____

I am requesting this amount from the Central AZ HIV Prevention Advocates
for my expenses.

I would not have been able to attend this meeting without this reimbursement.

Signature: _____ **Date:** _____

Maricopa County Department of Public Health
Central AZ HIV Prevention Advocates
4041 N Central Ave. Suite 1531 Phoenix, Arizona 85012
Phone: (602) 506-6009 Fax: (602) 506-6896



Central AZ HIV Prevention Advocates



Central AZ HIV Prevention Advocates Mileage Reimbursement Application

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone -day: _____ Phone - evenings: _____

E-mail: _____

The following stipulations apply:

- Reimbursements are based on round-trip mileage from your home to the Central AZ HIV Prevention Advocates meeting location
- If public transportation is being utilized you must provide receipts
- Reimbursements are on a meeting by meeting basis
- Members are responsible for informing staff when reimbursement is necessary
- Members must arrive on time and are expected to attend at least the majority of the meeting to receive reimbursement
- You must inform the Central AZ HIV Prevention Advocates coordinator **7 days in advance of the full group meeting** in order to receive reimbursement

Special Note: According to the by-laws the reimbursement process is a confidential one. It is the member's responsibility to see the Central AZ HIV Prevention Advocates coordinator during the break or at the end of the meeting to sign reimbursement documents.

Cash will not be available for distribution during full group meetings. Reimbursements will be issued in check form and will be available within 2-3 weeks after the full group meeting.

By signing this document I agree that the above statements are true and correct. I understand that if there are any changes to my mileage situation that affect this application it is my responsibility to inform the Central AZ HIV Prevention Advocates coordinator and update my application.

Signature

Date

Maricopa County Department of Public Health
Central AZ HIV Prevention Advocates
4041 N Central Ave. Suite 1531 Phoenix, Arizona 85012
Phone: (602) 506-6009 Fax: (602) 506-6896



Central AZ HIV Prevention Advocates



Central AZ HIV Prevention Advocates Mileage Reimbursement Form

To: _____

From Address: _____

To Address: _____

Phone: _____

Amount of Reimbursement: _____ (miles) X 44.5¢ = _____

Purpose: To attend the Central AZ HIV Prevention Advocates meeting on

I am requesting this amount from the Central AZ HIV Prevention Advocates for my travel expenses.

I would not have been able to attend this meeting without this reimbursement.

Signature: _____ Date: _____

Maricopa County Department of Public Health
Central AZ HIV Prevention Advocates
4041 N Central Ave Suite 1531 Phoenix, Arizona 85012
Phone: (602) 506-6009 Fax: (602) 506-6896

Appendix E:

***The Guidance:* HIV Prevention Community Planning Guide**

Appendix F: Advancing HIV Prevention: The Science Behind the New Initiative